

## (REFERENCE COPY - Not for submission) Request to Extend a Full Power FM Engineering STA Application

File Number:0000238585Submit Date:02/08/2024Lead Call Sign:KSDWFacility ID:52141

FRN: 0007309255

Service: Full Power FM | Purpose: STA Extension | Status: Granted

Status Date: 02/20/2024 | Filing Status: Active

General Information	Section	Question	Response
	Attachments	Are attachments (other than associated schedules) being filed with this application?	

Fees, Waivers, and Exemptions

Section	Question	Response
Waivers	Does this filing request a waiver of the Commission's rule (s)?	No
	Total number of rule sections involved in this waiver request:	

Applicant Information

## Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CALVARY CHAPEL OF COSTA MESA, INC. Doing Business As: CALVARY CHAPEL OF COSTA MESA, INC.	Lance Emma 3000 W. MACARTHUR BLVD. SUITE 500 SANTA ANA, CA 92704 United States	+1 (714) 918-6207	lemma@cccm. com	NFP

Contact Representatives (2)	Contact Name	Address	Phone	Email		Contact Type
	<b>Mark A. Balkin</b> Hardy, Carey, Chautin & Balkin, LLP	Mark A. Balkin 1080 West Causeway Approach Mandeville, LA 70471 United States	+1 (985) 629- 0777			Legal Representative
	Robert Branch , Jr <i>TECHNICAL CONSULTANT</i> CTM	440 Astillero Street Las Vegas, NV 89138 United States	+1 (434) 941- 9123	rbranch2013@iclo com	oud.	Technical Representative
Extension Request	Section	Question		I	Respo	onse
	Extension Request	Please enter the new requested expiration date:			08/17/2024	

General Certification Statements	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).			
	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002(c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.			
Authorized Party to Sign	<ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001)</li> <li>AND/OR REVOCATION OF ANY STATION</li> <li>AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503).</li> </ul>			
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Brian Brodersen President 02/08/2024		

## Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
STA Extension Narrative 240206 4881- 2095-6067 v.1.pdf	Applicant	Extension Request	STA Extension Narrative	Done with Virus Scan and/or Conversion